

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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LOBBYIST REGISTRATIONS FORM OF HAWAII (Type or Print Clearly)

PART I LOBBYIST	(Type of Prin			
NAME (Last)	(First)	(Middle)	TELEPHONE	
Nekota	Cameron	W.	(808) 674-3201	
MAILING ADDRESS (Street)			FAX	
1001 Kamokila Blvd.; J	(808) 674-3349			
(City)	(State)		(Zip Code)	
Kapolei	HI		96707	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
Aina Nui Corporation, a	(808) 674-6674			
MAILING ADDRESS (Street)	FAX			
1001 Kamokila Blvd.; James Campbell Building, Suite 255			(808) 674-3349	
(City)	(State)		(Zip Code)	
Kapolei	HI		96707	

PART II ORGANIZAT	TION		
NAME OF ORGANIZATION	TELEPHONE		
Aina Nui Corporation,	(808) 674-3201		
MAILING ADDRESS (Street)	FAX		
1001 Kamokila Blvd.;	(808) 674-3349		
(City)	(State)	(Zip Code)	
Kapolei	HI	96707	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
Cameron W. Nekota	(808) 674-3201		
MAILING ADDRESS (Street)	FAX		
1001 Kamokila Blvd.;	(808) 674-3349		
(City)	(State)	(Zip Code)	
Kapolei	HI	96707	

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PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBB	Υ		
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	Housing	☐ Public Safety & Corrections			
PART IV CERTIFICAT	ION OF LOBBYIST				
I hereby certify that t	the information furnished abov	re is, to the best of my knowled	dge, correct and complete.		
3/14/07					
(Signature of Lobbyist)			(Date)		
PART V AUTHORIZA	TION TO LOBBY				
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED			
Bradford J. Myers		President			
NAME OF ORGANIZATION (if applicable)			TELEPHONE		
Aina Nui Corporation, an affiliate of James Campbell Company LLC			(808) 674-3121		
MAILING ADDRESS (Street)			FAX		
1001 Kamokila Blvd.; James Campbell Building, Suite 255			(808) 674-3349		
(City)	(State)		(Zip Code)		
Kapolei	Н		96707		
I hereby authorize th	e above - named person to ei	ngage in lobbying activities on	behalf of the undersigned.		
B	(1) ·		3114107		
(Signature of	Authorizing Officer or Person Repres		(Date)		

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